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NORSELAND NURSING HOME 323 BLACK RIVER RD

Number of Residents on 12/31/04:

olo benon niiven no											
	WESTBY	54667	Phone: (608) 634-3747	'							
	Operated from	1/1 To 12/31	Days of Operation:	366							
	Operate in Con	junction with	Hospital?	No							
	Number of Beds	Set Up and St	affed (12/31/04):	59							
	Total Licensed	Bed Capacity	(12/31/04):	59							

Ownership: City
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes

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Services Provided to Non-Residents	Age, Gender, and Primary Di	agnosis	of Residents (1	2/31/04)	Length of Stay (12/31/04)	%		
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	30.4	
Supp. Home Care-Personal Care	No					1 - 4 Years	33.9	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	35.7	
Day Services	No	Mental Illness (Org./Psy)	Mental Illness (Org./Psy) 35.7 65 - 74 3.6					
Respite Care	No	Mental Illness (Other)	1.8	75 - 84	23.2		100.0	
Adult Day Care No		Alcohol & Other Drug Abuse	0.0	85 - 94	57.1	**********		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	16.1	Full-Time Equivaler	ıt	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Re	esidents	
Home Delivered Meals	No	Fractures	0.0	İ	100.0	(12/31/04)		
Other Meals	No	Cardiovascular	7.1	65 & Over	100.0			
Transportation	No	Cerebrovascular	3.6	j		RNs	11.8	
Referral Service	No	Diabetes	3.6	Gender	%	LPNs	7.6	
Other Services	No	Respiratory	7.1			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	41.1	Male	30.4	Aides, & Orderlies	36.4	
Mentally Ill	No	İ		Female	69.6			
Provide Day Programming for			100.0	İ				
Developmentally Disabled	No			İ	100.0			
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Average Daily Census:

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	:		amily Care		1	Managed Care	Į.		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	353	40	97.6	115	0	0.0	0	7	100.0	143	0	0.0	0	6	100.0	322	55	98.2
Intermediate				1	2.4	95	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt O	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0		41	100.0		0	0.0		7	100.0		0	0.0		6	100.0		56	100.0

NORSELAND NURSING HOME

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, and	d Activities as of 12/	31/04
Deaths During Reporting Period					0. No a d d as as		Total
					% Needing		
Percent Admissions from:		Activities of	8		sistance of		Number of
Private Home/No Home Health	8.8	Daily Living (ADL)	Independent	One	e Or Two Staff	-1	Residents
Private Home/With Home Health	1.8	Bathing	0.0		28.6	71.4	56
Other Nursing Homes	7.0	Dressing	16.1		33.9	50.0	56
Acute Care Hospitals	73.7	Transferring	28.6		48.2	23.2	56
Psych. HospMR/DD Facilities	0.0	Toilet Use	19.6		41.1	39.3	56
Rehabilitation Hospitals	1.8	Eating	46.4		35.7	17.9	56
Other Locations	7.0	******	******	*****	*****	******	******
Total Number of Admissions	57	Continence		%	Special Treatmen	ts	8
Percent Discharges To:		Indwelling Or Extern	nal Catheter	17.9	Receiving Resp	iratory Care	7.1
Private Home/No Home Health	29.3	Occ/Freq. Incontiner	nt of Bladder	48.2	Receiving Track	neostomy Care	0.0
Private Home/With Home Health	13.8	Occ/Freq. Incontiner	nt of Bowel	28.6	Receiving Suct	ioning	1.8
Other Nursing Homes	3.4	İ			Receiving Osto	my Care	1.8
Acute Care Hospitals	5.2	Mobility			Receiving Tube	Feeding	1.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	8.9	Receiving Mech	anically Altered Diets	37.5
Rehabilitation Hospitals	0.0	į -				-	
Other Locations	8.6	Skin Care			Other Resident Cl	naracteristics	
Deaths	39.7	With Pressure Sores		5.4	Have Advance D	irectives	92.9
Total Number of Discharges		With Rashes		3.6	Medications		
(Including Deaths)	58				Receiving Psycl	noactive Drugs	53.6

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	This Government			-99	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	8	8	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96.6	91.7	1.05	85.5	1.13	85.9	1.13	88.8	1.09
Current Residents from In-County	83.9	77.0	1.09	71.5	1.17	75.1	1.12	77.4	1.08
Admissions from In-County, Still Residing	28.1	23.6	1.19	20.7	1.36	20.5	1.37	19.4	1.45
Admissions/Average Daily Census	100.0	104.9	0.95	125.2	0.80	132.0	0.76	146.5	0.68
Discharges/Average Daily Census	101.8	104.7	0.97	123.1	0.83	131.4	0.77	148.0	0.69
Discharges To Private Residence/Average Daily Census	43.9	49.3	0.89	55.7	0.79	61.0	0.72	66.9	0.66
Residents Receiving Skilled Care	98.2	95.3	1.03	95.8	1.03	95.8	1.02	89.9	1.09
Residents Aged 65 and Older	100	87.8	1.14	93.1	1.07	93.2	1.07	87.9	1.14
Title 19 (Medicaid) Funded Residents	73.2	67.5	1.08	69.1	1.06	70.0	1.05	66.1	1.11
Private Pay Funded Residents	12.5	17.9	0.70	20.2	0.62	18.5	0.68	20.6	0.61
Developmentally Disabled Residents	0.0	0.8	0.00	0.5	0.00	0.6	0.00	6.0	0.00
Mentally Ill Residents	37.5	45.1	0.83	38.6	0.97	36.6	1.02	33.6	1.12
General Medical Service Residents	41.1	14.8	2.78	18.9	2.17	19.7	2.08	21.1	1.95
Impaired ADL (Mean)	59.6	49.0	1.22	46.2	1.29	47.6	1.25	49.4	1.21
Psychological Problems	53.6	61.8	0.87	59.0	0.91	57.1	0.94	57.7	0.93
Nursing Care Required (Mean)	7.4	7.1	1.03	7.0	1.06	7.3	1.01	7.4	0.99